IN THE CLAIMS

- 1. (currently amended) A method of managing the use of a medical scheme by members thereof including:
- defining a plurality of health-related facilities and/or services;
- offering the facilities and/or services to members of the medical aid scheme;
- monitoring use of the facilities and/or services by each member;
- allocating a credit value to each member according to their use of the facilities and/or services; and
- allocating rewards to members who accumulate credit values exceeding predetermined values.
- 2. (original) A method according to claim 1 wherein the plurality of health-related facilities and/or services includes at least one of the group consisting of membership of health clubs, membership of gymnasiums, membership of fitness programs, weight loss programs and programs to quit smoking.
- 3. (original) A method according to claim 2 wherein the plurality of health-related facilities and/or services further includes predetermined preventive medical procedures.
- 4. (original) A method according to claim 2 wherein the plurality of health-related facilities and/or services further includes a medical advice service.

- 5. (original) A method according to claim 2 wherein the plurality of health-related facilities and/or services further includes predetermined procedures.
- 6. (original) A method according to claim 5 wherein the predetermined procedures include at least one of the group consisting of advance pre-authorization of hospitalization, advance pre-authorization of treatment, registration for electronic funds transfer and compliance with preferred procedures.
- 7. (original) A method according to claim 1 wherein a reward allocated to a member is linked to the amount of the member's annual claims or whether or not the member has been hospitalized in a predetermined period of time.
- 8. (original) A method according to claim 7 wherein the reward allocated to the member includes at least one of the group consisting of: prizes allocated on the basis of a draw, the magnitude of a member's credit value being related to the chance of winning the draw; access to health-related facilities and/or services for family members; decreased premium payments according to a predetermined scheme; and increased benefit payments according to a predetermined scheme.
- 9. (original) A method according to claim 1 wherein a reward allocated to a member is not actually given to the member before a predetermined period has passed or the member has attained a predetermined age.

- 10. (original) A method according to claim 9 wherein the reward allocated is forfeited by the member if they are not still a member of the medical aid scheme after the predetermined period has passed or after the member has attained such predetermined age.
- 11. (original) In a method of managing the business of a medical scheme wherein the provider of such medical scheme undertakes liability in return for a premium or contribution, and provides to members who pay such premiums or make such contributions, relevant health services, and/or assistance in defraying expenses incurred in connection with rendering such relevant health services, the improvement comprising:
- defining a plurality of health-related facilities and/or services;
- offering the facilities and/or services to members of the medical aid scheme;
- monitoring use of the facilities and/or services by each member;
- allocating a credit value to each member according to each use of the facilities and/or services; and
- allocating rewards to members who accumulate credit values exceeding predetermined values.
- 12. (new) A method according to claim 3 wherein the preventive medical procedures include vaccinations.
- 13. (new) A method according to claim 1 wherein the provider of such medical scheme undertakes liability in return for a premium or contribution, and provides to members who

pay such premiums or make such contributions, relevant health services, and/or assistance in defraying expenses incurred in connection with rendering such relevant health services.

14. (new) A method according to claim 13 including:

the provider offering the facilities and/or services in conjunction with third party service providers that provide health related facilities and/or services; and

monitoring the use of the facilities and/or services by members by receiving information from the third party service providers detailing the use of the health related facilities and/or services by the members.

15. (new) A method according to claim 14 wherein the members only pay a once off activation fee to gain access to the plurality of health related facilities and/or services.